



Attorney Docket No. SON-1973 Date: December 21, 2000

FILING FEE

\$1676.00

ASSISTANT COMMISSIONER FOR PATENTS Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s):Toshiro KISAKIBARU

For: HOME DOCTOR SYSTEM, BLOOD CAPSULE AND INJECTION APPLIANCE

Enclosed are:

CLAIMS AS FILED

- \boxtimes Specification and Claim(s).
- ☑ Oath or Declaration.
- 14 Sheet(s) of drawings.
- An assignment of the invention to Sony Corporation.
- \square Copy of ____ priority application(s).
- \square Associate Power of Attorney.

The fee has been calculated as shown below:

BASIC FEE RATE FOR NUMBER EXTRA \$355/\$710 NUMBER FILED TOTAL X \$ 9 CLAIMS 37-20 17 \$18 \$306.00 INDEP. X \$40 CLAIMS 8-3 \$400.00 \$80 Fee for Multiple Dependent Claims \$130/\$260 \$269.00 TOTAL

A Preliminary Amendment is attached. °Verified Statement claiming small entity status is enclosed. Charge \$ 1676.00 to Deposit Account No. 18-0013 to cover the \mathbf{X} filing fee. A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any fees under $|\mathbf{x}|$ 37 C.F.R. 1.16 or 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 18-0013. A duplicate copy of this sheet is enclosed. A check in the amount of \$_____ cover the filing fee is enclosed. to Deposit Account No. 18-0013 to cover Charge \$ the recordal fee. A duplicate copy of this sheet is enclosed. Applicant's undersigned attorney may be reached by telephone in \times our Washington D.C. Office at (202) 955-3750. All correspondence should be directed to our below listed address.

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